


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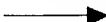
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J1058 U.S. PTOPlease type a plus sign (+) inside this box Approved for use through 10/31/2002 OMB 0651-0032
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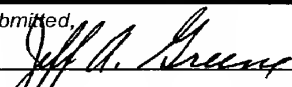
PROVISIONAL APPLICATION FOR PATENT COVER SHEET
This is a request for filing a PROVISIONAL APPLICATION FOR PATENT under 37 CFR 1.53(c).JC731 U.S. PTO
09/905698

07/10/01

INVENTOR(S)					
Given Name (first and middle [if any])	Family Name or Surname	Residence (City and either State or Foreign Country)			
Richard R.	Dickson	Peoria, Illinois			
Russell R.	Graze	Dunlap, Illinois			
<input type="checkbox"/> Additional inventors are being named on the _____ separately numbered sheets attached hereto					
TITLE OF THE INVENTION (280 characters max)					
EXHAUST GAS PARTICULATE MEASURING SYSTEM					
Direct all correspondence to: CORRESPONDENCE ADDRESS					
<input checked="" type="checkbox"/> Customer Number 719		 <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;">Place Customer Number Bar Code Label here</div>			
OR Type Customer Number here					
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ENCLOSED APPLICATION PARTS (check all that apply)					
<input checked="" type="checkbox"/> Specification Number of Pages 11		<input type="checkbox"/> CD(s), Number 			
<input checked="" type="checkbox"/> Drawing(s) Number of Sheets 		<input type="checkbox"/> Other (specify) 			
<input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76					
METHOD OF PAYMENT OF FILING FEES FOR THIS PROVISIONAL APPLICATION FOR PATENT					
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.					FILING FEE AMOUNT (\$) <div style="border: 1px solid black; padding: 10px; width: 100px; margin: 0 auto;">150.00</div>
<input type="checkbox"/> A check or money order is enclosed to cover the filing fees					
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge filing fees or credit any overpayment to Deposit Account Number: 03-1129					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
The invention was made by an agency of the United States Government or under a contract with an agency of the United States Government.					
<input checked="" type="checkbox"/> No.					
<input type="checkbox"/> Yes, the name of the U.S. Government agency and the Government contract number are _____					

Respectfully submitted,

SIGNATURE

TYPED or PRINTED NAME Jeff A. GreeneTELEPHONE (309) 675-1056Date 07/10/01

REGISTRATION NO.

(if appropriate)

Docket Number:

45,75600-714**USE ONLY FOR FILING A PROVISIONAL APPLICATION FOR PATENT**

This collection of information is required by 37 CFR 1.51. The information is used by the public to file (and by the PTO to process) a provisional application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 8 hours to complete, including gathering, preparing, and submitting the complete provisional application to the PTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Box Provisional Application, Assistant Commissioner for Patents, Washington, D.C. 20231.

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